


| CERTIFICATE OF MAILING | | | |
|---|---|------|-----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | |
| Typed or Printed Name | Alan W. Cannon | | |
| Signature |  | Date | October 9, 2003 |

| COMMUNICATION Address to: Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket Confirmation No. | GUID-003CON3 1695 |
|--|----------------------------------|--|
| | First Named Inventor | Charles S. Taylor |
| | Application Number | 10/020,451 |
| | Filing Date | December 14, 2001 |
| | Group Art Unit | 3736 |
| | Examiner Name | Nasser, Robert L. |
| | Title | Surgical Devices for Imposing a Negative Pressure to Stabilize Cardiac Tissue During Surgery n |

Sir:

This is to request that the Power of Attorney and change of correspondence address filed March 6, 2003 be made effective in this case. A stamped postcard, dated March 13, 2003 was received by our office indicating that the Patent Office has received the filing. However, an Office Action mailed on May 9, 2003 was mailed to the old correspondence address and old attorneys of record, who are no longer handling this case. Please update your records. Copies of the documents filed March 13, 2003, as well as the stamped postcard we received are submitted herewith.

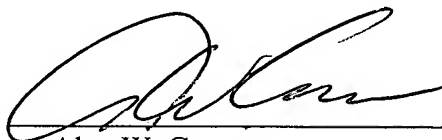
Thank you for your attention to this matter.

Respectfully submitted,
LAW OFFICE OF ALAN W. CANNON

Date:

Oct. 9, 2003

By:



Alan W. Cannon
Registration No. 34,977

LAW OFFICE OF ALAN W. CANNON
834 South Wolfe Road
Sunnyvale, CA 94086
Telephone: (408) 736-3554
Facsimile: (408) 736-3564

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OCT 17 2003

TECHNOLOGY CENTER R3700

**POWER OF ATTORNEY
BY ASSIGNEE**

| | |
|---|--------------------|
| Attorney Docket | GUID-003CON3 |
| First Named Inventor | Taylor, Charles S. |
| Application Number | 10/020,451 |
| Confirmation Number | 1695 |
| Filing Date | December 14, 2001 |
| Examiner Name | Robert Nasser |
| Title: Surgical Devices for Imposing a Negative Pressure to Stabilize Cardiac Tissue During Surgery | |

Cardiothoracic Systems, Inc., assignee of the above-identified application by assignment dated December 14, 2001, hereby revoke all previous powers and appoint:

| Name | Registration No. | Name | Registration No. |
|------------------|------------------|------|------------------|
| Alan W. Cannon | 34,977 | | |
| Ronald D. Devore | 39,958 | | |
| | | | |
| | | | |
| | | | |
| | | | |

as its attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

DIRECT ALL CORRESPONDENCE TO:

| | | | |
|------------------|---------------------------------|-----------|----------------|
| Individual Name | Alan W. Cannon; Reg. No. 34,977 | | |
| Firm Name | LAW OFFICE OF ALAN W. CANNON | | |
| Address | 834 South Wolfe Road | | |
| City, State, Zip | Sunnyvale, California 94086 | | |
| Country | U.S.A. | | |
| Telephone | (408) 736-3554 | Facsimile | (408) 736-3564 |

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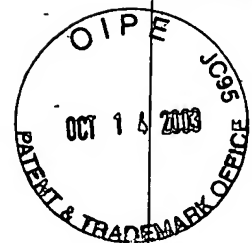
TECHNOLOGY CENTER R3700

SIGNATURE of Assignee of Record

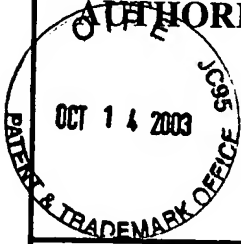
In accordance with 37 CFR §3.73(b) I hereby certify that I am empowered to act on behalf of the Assignee of the above-identified patent application. The Assignment was recorded with the U.S. Patent Office on **December 14, 2001 at Reel 012388, Frame 0669.**

I declare that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code §1001 and that such willful false statements may jeopardize the validity of the above referenced application or any patent resulting from that application.

| | | | |
|------------------|---|------|---------------|
| Name and Company | Ronald D. Devore; Cardiothoracic Systems, Inc. | | |
| Title | Assistant Secretary | | |
| Signature |  | Date | March 4, 2003 |



**REVOCATION OF POWER
OF ATTORNEY OR
AUTHORIZATION OF AGENT**



| | |
|----------------------|--|
| Attorney Docket | GUID-003CON3 |
| First Named Inventor | Taylor, Charles S. |
| Application Number | 10/020,451 |
| Confirmation Number | 1695 |
| Filing Date | December 14, 2001 |
| Art Unit | 3736 |
| Examiner Name | Robert Nasser |
| Title | Surgical Devices for Imposing a Negative Pressure to Stabilize Cardiac Tissue During Surgery |

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

X A Power of Attorney or Authorization of Agent is submitted herewith.

AND

X Please change the correspondence address for the above-identified application to:

| | | | |
|------------------|------------------------------|-----------|----------------|
| Individual Name | Alan W. Cannon | | |
| Firm Name | Law Office of Alan W. Cannon | | |
| Address | 834 South Wolfe Road | | |
| City, State, Zip | Sunnyvale, California 94086 | | |
| Country | U.S.A. | | |
| Telephone | (408) 736-3554 | Facsimile | (408) 736-3564 |

I am the:

 Applicant; or
 X Assignee of record of the entire interest
(Certificate under 37 CFR 3.73(b) is enclosed.)

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OCT 17 2003

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|-------------------------|
| Name | Ronald D. Devore |
| Signature | <i>Ronald D. Devore</i> |
| Date | <i>March 4, 2003</i> |

TECHNOLOGY CENTER #2700